

**HOWISON & ARNOTT, L.L.P.**

A LIMITED LIABILITY PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

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**DATE:** October 1, 2004  
**TO:** Examiner: Kenneth S. Kim  
**COMPANY:** U. S. Patent Office  
**FAX NUMBER:** Centralized Fax: (703) 872-9306  
**FROM:** Howison & Arnett, L.L.P. (Gregory M. Howison)  
**OUR FILE :** CYGL-25,768  
**SERIAL NO.:** 09/885,459  
**ATTACHED:** Trans Form (1); Fee Trans (1); Credit Card form (1);  
Amendment (6); RCE (1).

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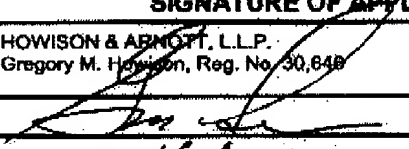
PTO/SB/21 (02-04)

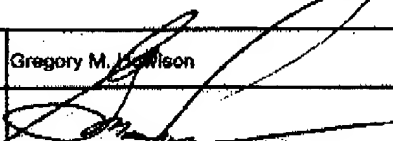
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/885,459	
	Filing Date	June 19, 2001	
	First Named Inventor	Donald E. Alfano et al.	
	Art Unit	2111	
	Examiner Name	Kenneth S. Kim	
Total Number of Pages in This Submission	10	Attorney Docket Number	CYGL-25,768

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	HOWISON & ARNOFF, L.L.P. Gregory M. Howison, Reg. No. 30,648	
Signature		
Date	10/1/04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Gregory M. Howison	
Signature		Date 10/1/04

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**FEE TRANSMITTAL  
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 790.00**Complete if Known**

Application Number	09/885,459
Filing Date	June 19, 2001
First Named Inventor	Donald E. Alfano et al.
Examiner Name	Kenneth S. Kim
Art Unit	2111
Attorney Docket No.	CYGL-25,768

**METHOD OF PAYMENT (check all that apply)**
☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account:

Deposit Account Number: 20-0780/CYGL-25,768

Deposit Account Name: HOWISON &amp; ARNOTT, L.L.P.

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 100	2005 60	Provisional filing fee	

**SUBTOTAL (1)** (\$)-0-**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent Claims	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$)-0-

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65		Surcharge - late filing fee or oath	
1052 50	2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130		Non-English specification	
1812 2,520	1812 2,520		For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*		Requesting publication of SIR after Examiner action	
1251 110	2251 55		Extension for reply within first month	
1252 420	2252 210		Extension for reply within second month	
1253 850	2253 475		Extension for reply within third month	
1254 1,480	2254 740		Extension for reply within fourth month	
1255 2,010	2255 1,005		Extension for reply within fifth month	
1401 330	2401 165		Notice of Appeal	
1402 330	2402 165		Filing a brief in support of an appeal	
1403 290	2403 145		Request for oral hearing	
1451 1,510	1451 1,510		Petition to institute a public use proceeding	
1452 110	2452 55		Petition to revive - unavoidable	
1453 1,330	2453 665		Petition to revive - unintentional	
1501 1,330	2501 665		Utility issue fee (or reissue)	
1502 480	2502 240		Design issue fee	
1503 840	2503 320		Plant issue fee	
1480 130	1480 130		Petitions to the Commissioner	
1807 50	1807 50		Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180		Submission of Information Disclosure Stmt	
8021 40	8021 40		Recording each patent assignment per property (times number of properties)	
1809 770	2809 385		Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385		For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385		Request for Continued Examination (RCE)	790.00
1802 900	1802 900		Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid.

**SUBTOTAL (3)** (\$) 790.00**SUBMITTED BY**

Name (Print/Type) Gregory M. Howison

Registration No.

30,646

(Complete if applicable)

Telephone 972-680-8050

Signature

Date

10/1/04

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